

**IN THE UNITED STATES BANKRUPTCY COURT  
FOR THE SOUTHERN DISTRICT OF TEXAS  
HOUSTON DIVISION**

**IN RE:**

**LIMETREE BAY SERVICES, LLC, *et al.*,<sup>1</sup>**

**Debtors.**

**CHAPTER 11**

**CASE NO.: 21-32351**

**(Jointly Administered)**

**DISCLAIMER REGARDING DEBTORS' SCHEDULES AND SOFA**

**General Disclaimer**

1. The Schedules and the SOFA are unaudited and subject to potential adjustment. In preparing the Schedules and the SOFA, the CRO and his professionals relied on financial data derived from the Debtors' books and records that was available at the time of preparation. The CRO and his professionals have made reasonable efforts to ensure that the Schedules and the SOFA are as accurate and complete as possible under the circumstances; however, subsequent information or discovery may result in changes to the Schedules and SOFA and errors or omissions may exist.

2. The CRO reserves all rights to amend or supplement the Schedules and SOFA from time to time, in all respects, as may be necessary or appropriate, including the right to dispute or otherwise assert offsets or defenses to any claim reflected on the Schedules and SOFA as to any amount, liability, classification, identity of debtor or to otherwise subsequently designate any claim as "disputed", "contingent", or "unliquidated". Furthermore, nothing

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<sup>1</sup> The Debtors in these chapter 11 cases, along with the last four digits of each Debtor's federal tax identification number, as applicable, are: Limetree Bay Services, LLC (1866); Limetree Bay Refining Holdings, LLC.(1776); Limetree Bay Refining Holdings II, LLC (1815); Limetree Bay Refining, LLC (8671); Limetree Bay Refining Operating, LLC (9067); Limetree Bay Refining Marketing, LLC (9222). The Debtors' mailing address is Limetree Bay Services, LLC, 11100 Brittmoore Park Drive, Houston, TX 77041.

contained in the Schedules and SOFA shall constitute a waiver of any of the CRO's rights or an admission with respect to these chapter 11 cases, including any issues involving objections to claims, substantive consolidation, defenses, affirmative claims against third parties or rights against third parties, other issues that typically arise under the Bankruptcy Code.

**Notes on Schedules of Assets and Liabilities**

**Method of Valuation**

3. Unless otherwise noted, the carrying value on the Debtors' books and records (net book value) as of the Petition Date, rather than the current market values, of the Debtors' interest in the property and of the Debtors' liabilities, is reflected on the Debtors' Schedules and SOFA. The net book value may not correspond to market value, or liquidation value, of which may be either higher or lower.

Dated: September 7, 2021

**BAKER & HOSTETLER LLP**

/s/ Elizabeth A. Green

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*(Admitted Pro Hac Vice)*

*Proposed Counsel for the Debtors and  
Debtors in Possession*

**Fill in this information to identify the case:**Debtor name Limetree Bay Services, LLCUnited States Bankruptcy Court for the: SOUTHERN DISTRICT OF TEXASCase number (if known) 21-32351☐ Check if this is an amended filing**Official Form 206Sum  
Summary of Assets and Liabilities for Non-Individuals**

12/15

**Part 1: Summary of Assets****1. Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)

<b>1a. Real property:</b> Copy line 88 from <i>Schedule A/B</i> .....	\$ <u>0.00</u>
<b>1b. Total personal property:</b> Copy line 91A from <i>Schedule A/B</i> .....	\$ <u>5,557,037.31</u>
<b>1c. Total of all property:</b> Copy line 92 from <i>Schedule A/B</i> .....	\$ <u>5,557,037.31</u>

**Part 2: Summary of Liabilities**

<b>2. Schedule D: Creditors Who Have Claims Secured by Property</b> (Official Form 206D) Copy the total dollar amount listed in Column A, <i>Amount of claim</i> , from line 3 of <i>Schedule D</i> .....	\$ <u>0.00</u>
<b>3. Schedule E/F: Creditors Who Have Unsecured Claims</b> (Official Form 206E/F)	
<b>3a. Total claim amounts of priority unsecured claims:</b> Copy the total claims from Part 1 from line 5a of <i>Schedule E/F</i> .....	\$ <u>0.00</u>
<b>3b. Total amount of claims of nonpriority amount of unsecured claims:</b> Copy the total of the amount of claims from Part 2 from line 5b of <i>Schedule E/F</i> .....	+\$ <u>5,939,012.81</u>
<b>4. Total liabilities</b> ..... Lines 2 + 3a + 3b	\$ <u>5,939,012.81</u>

**Fill in this information to identify the case:**Debtor name Limetree Bay Services, LLCUnited States Bankruptcy Court for the: SOUTHERN DISTRICT OF TEXASCase number (if known) 21-32351☐ Check if this is an amended filing**Official Form 206A/B****Schedule A/B: Assets - Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

**Part 1: Cash and cash equivalents****1. Does the debtor have any cash or cash equivalents?**

- ☐ No. Go to Part 2.  
☒ Yes Fill in the information below.

**All cash or cash equivalents owned or controlled by the debtor****Current value of debtor's interest****3. Checking, savings, money market, or financial brokerage accounts (Identify all)**

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

3.1. CitibankChecking Account0919\$8,306.97**4. Other cash equivalents (Identify all)****5. Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$8,306.97**Part 2: Deposits and Prepayments****6. Does the debtor have any deposits or prepayments?**

- ☒ No. Go to Part 3.  
☐ Yes Fill in the information below.

**Part 3: Accounts receivable****10. Does the debtor have any accounts receivable?**

- ☐ No. Go to Part 4.  
☒ Yes Fill in the information below.

**11. Accounts receivable**

11a. 90 days old or less:

1,918,838.02

-

0.00

= ....

\$1,918,838.02

face amount

doubtful or uncollectible accounts

11b. Over 90 days old:	<u>3,629,892.32</u>	-	<u>0.00</u>	=....	<u>\$3,629,892.32</u>
	face amount		doubtful or uncollectible accounts		

\$5,548,730.34

☐ No. Go to Part 5.

☐ Yes Fill in the information below.

☐ No. Go to Part 6.

☐ Yes Fill in the information below.

☐ No. Go to Part 7.

☐ Yes Fill in the information below.

☐ No. Go to Part 8.

☐ Yes Fill in the information below.

☐ No. Go to Part 9.

☐ Yes Fill in the information below.

☐ No. Go to Part 10.

☒ Yes Fill in the information below.

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building, if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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Debtor Limetree Bay Services, LLC  
NameCase number (If known) 21-32351

55.1. **Houston Lease - 842**  
**West Sam Houston**  
**Parkway North,**  
**Houston Texas,**  
**77024 - Office**  
**Sublease between**  
**Debtor and Gulfmark**  
**Offshore, Inc. dated**  
**9/1/19**

Lease

\$0.00

\$0.00

56. **Total of Part 9.**

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets.  
 Copy the total to line 88.

\$0.00

57. **Is a depreciation schedule available for any of the property listed in Part 9?**

- ☒ No  
☐ Yes

58. **Has any of the property listed in Part 9 been appraised by a professional within the last year?**

- ☒ No  
☐ Yes

**Part 10: Intangibles and intellectual property**59. **Does the debtor have any interests in intangibles or intellectual property?**

- ☒ No. Go to Part 11.  
☐ Yes Fill in the information below.

**Part 11: All other assets**70. **Does the debtor own any other assets that have not yet been reported on this form?**

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☒ No. Go to Part 12.  
☐ Yes Fill in the information below.

Debtor Limetree Bay Services, LLC  
NameCase number (If known) 21-32351**Part 12: Summary**

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. <b>Cash, cash equivalents, and financial assets.</b> <i>Copy line 5, Part 1</i>	<u>\$8,306.97</u>	
81. <b>Deposits and prepayments.</b> <i>Copy line 9, Part 2.</i>	<u>\$0.00</u>	
82. <b>Accounts receivable.</b> <i>Copy line 12, Part 3.</i>	<u>\$5,548,730.34</u>	
83. <b>Investments.</b> <i>Copy line 17, Part 4.</i>	<u>\$0.00</u>	
84. <b>Inventory.</b> <i>Copy line 23, Part 5.</i>	<u>\$0.00</u>	
85. <b>Farming and fishing-related assets.</b> <i>Copy line 33, Part 6.</i>	<u>\$0.00</u>	
86. <b>Office furniture, fixtures, and equipment; and collectibles.</b> <i>Copy line 43, Part 7.</i>	<u>\$0.00</u>	
87. <b>Machinery, equipment, and vehicles.</b> <i>Copy line 51, Part 8.</i>	<u>\$0.00</u>	
88. <b>Real property.</b> <i>Copy line 56, Part 9.....&gt;</i>		<u>\$0.00</u>
89. <b>Intangibles and intellectual property.</b> <i>Copy line 66, Part 10.</i>	<u>\$0.00</u>	
90. <b>All other assets.</b> <i>Copy line 78, Part 11.</i>	<u>+</u> <u>\$0.00</u>	
91. <b>Total.</b> Add lines 80 through 90 for each column	<u>\$5,557,037.31</u>	+ 91b. <u>\$0.00</u>
92. <b>Total of all property on Schedule A/B.</b> Add lines 91a+91b=92		<u>\$5,557,037.31</u>



**Fill in this information to identify the case:**

Debtor name Limetree Bay Services, LLC

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF TEXAS

Case number (if known) 21-32351

☐ Check if this is an amended filing

Official Form 206D

**Schedule D: Creditors Who Have Claims Secured by Property**

12/15

Be as complete and accurate as possible.

**1. Do any creditors have claims secured by debtor's property?**

☒ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.

☐ Yes. Fill in all of the information below.

**Fill in this information to identify the case:**Debtor name **Limetree Bay Services, LLC**United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF TEXAS**Case number (if known) **21-32351**☐ Check if this is an amended filing**Official Form 206E/F****Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

**Part 1: List All Creditors with PRIORITY Unsecured Claims**

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☐ No. Go to Part 2.☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

2.1 Priority creditor's name and mailing address

**Anh Tran**

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent☒ Unliquidated☐ Disputed

Date or dates debt was incurred

Basis for the claim:

**Unpaid wages and/or vacation time which may be asserted**

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)

Is the claim subject to offset?

☒ No☐ Yes

Total claim Priority amount

**Unknown****Unknown**

2.2 Priority creditor's name and mailing address

**Charles Dubovsky**

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent☒ Unliquidated☐ Disputed

Date or dates debt was incurred

Basis for the claim:

**Unpaid wages and/or vacation time which may be asserted**

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)

Is the claim subject to offset?

☒ No☐ Yes**Unknown****Unknown**

Debtor	<b>Limetree Bay Services, LLC</b> Name	Case number (if known)	<b>21-32351</b>
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2.3	Priority creditor's name and mailing address <b>Danny Norris</b> <div style="background-color: black; width: 150px; height: 20px; margin-top: 5px;"></div>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Unknown</b>	<b>Unknown</b>
	Date or dates debt was incurred  	Basis for the claim: <b>Unpaid wages and/or vacation time which may be asserted</b>		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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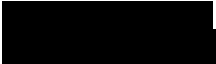
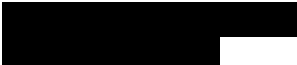
2.4	Priority creditor's name and mailing address <b>David Alvarado</b> <div style="background-color: black; width: 150px; height: 20px; margin-top: 5px;"></div>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Unknown</b>	<b>Unknown</b>
	Date or dates debt was incurred  	Basis for the claim: <b>Unpaid wages and/or vacation time which may be asserted</b>		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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2.5	Priority creditor's name and mailing address <b>David Molloy</b> <div style="background-color: black; width: 150px; height: 20px; margin-top: 5px;"></div>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Unknown</b>	<b>Unknown</b>
	Date or dates debt was incurred  	Basis for the claim: <b>Unpaid wages and/or vacation time which may be asserted</b>		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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2.6	Priority creditor's name and mailing address <b>David Wilson</b> <div style="background-color: black; width: 150px; height: 20px; margin-top: 5px;"></div>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Unknown</b>	<b>Unknown</b>
	Date or dates debt was incurred  	Basis for the claim: <b>Unpaid wages and/or vacation time which may be asserted</b>		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor <b>Limetree Bay Services, LLC</b>		Case number (if known) <b>21-32351</b>	
2.7	Priority creditor's name and mailing address <b>Forgan McIntosh</b>  <hr/> Date or dates debt was incurred <hr/> Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <hr/> Basis for the claim: <b>Unpaid wages and/or vacation time which may be asserted</b> <hr/> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b> <b>Unknown</b>
2.8	Priority creditor's name and mailing address <b>Heather Ward</b>  <hr/> Date or dates debt was incurred <hr/> Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <hr/> Basis for the claim: <b>Unpaid wages and/or vacation time which may be asserted</b> <hr/> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b> <b>Unknown</b>
2.9	Priority creditor's name and mailing address <b>Jackie Turk</b>  <hr/> Date or dates debt was incurred <hr/> Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <hr/> Basis for the claim: <b>Unpaid wages and/or vacation time which may be asserted</b> <hr/> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b> <b>Unknown</b>
2.10	Priority creditor's name and mailing address <b>James Vanderwel</b>  <hr/> Date or dates debt was incurred <hr/> Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <hr/> Basis for the claim: <b>Unpaid wages and/or vacation time which may be asserted</b> <hr/> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b> <b>Unknown</b>

Debtor	<b>Limetree Bay Services, LLC</b> Name	Case number (if known)	<b>21-32351</b>
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2.11	Priority creditor's name and mailing address <b>Jeffery Hersperger</b> <div style="background-color: black; width: 200px; height: 20px; margin-top: 5px;"></div>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Unknown</b>	<b>Unknown</b>
	Date or dates debt was incurred	Basis for the claim: <b>Unpaid wages and/or vacation time which may be asserted</b>		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		




2.12	Priority creditor's name and mailing address <b>Jeffrey Rinker</b> <div style="background-color: black; width: 150px; height: 20px; margin-top: 5px;"></div>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Unknown</b>	<b>Unknown</b>
	Date or dates debt was incurred	Basis for the claim: <b>Unpaid wages and/or vacation time which may be asserted</b>		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.13	Priority creditor's name and mailing address <b>Jesus Duran</b> <div style="background-color: black; width: 150px; height: 20px; margin-top: 5px;"></div>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Unknown</b>	<b>Unknown</b>
	Date or dates debt was incurred	Basis for the claim: <b>Unpaid wages and/or vacation time which may be asserted</b>		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.14	Priority creditor's name and mailing address <b>Jodi Mitchell</b> <div style="background-color: black; width: 130px; height: 20px; margin-top: 5px;"></div>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Unknown</b>	<b>Unknown</b>
	Date or dates debt was incurred	Basis for the claim: <b>Unpaid wages and/or vacation time which may be asserted</b>		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor <b>Limetree Bay Services, LLC</b>		Case number (if known) <b>21-32351</b>	
Name			
2.15	Priority creditor's name and mailing address <b>Joel Wiggins</b> 	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Unknown</b> <b>Unknown</b>
	Date or dates debt was incurred  	Basis for the claim: <b>Unpaid wages and/or vacation time which may be asserted</b>	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.16	Priority creditor's name and mailing address <b>Jonathan Burns</b> 	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Unknown</b> <b>Unknown</b>
	Date or dates debt was incurred  	Basis for the claim: <b>Unpaid wages and/or vacation time which may be asserted</b>	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.17	Priority creditor's name and mailing address <b>Keith Neal</b> 	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Unknown</b> <b>Unknown</b>
	Date or dates debt was incurred  	Basis for the claim: <b>Unpaid wages and/or vacation time which may be asserted</b>	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.18	Priority creditor's name and mailing address <b>Kelvin Quach</b> 	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Unknown</b> <b>Unknown</b>
	Date or dates debt was incurred  	Basis for the claim: <b>Unpaid wages and/or vacation time which may be asserted</b>	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	Name	Case number (if known)	21-32351
2.19	Priority creditor's name and mailing address <b>Mark Chavez</b> <div style="background-color: black; width: 100px; height: 20px; margin-top: 5px;"></div>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Unknown</b> <b>Unknown</b>
	Date or dates debt was incurred  	Basis for the claim: <b>Unpaid wages and/or vacation time which may be asserted</b>	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.20	Priority creditor's name and mailing address <b>Nicholas Norstrom</b> <div style="background-color: black; width: 100px; height: 20px; margin-top: 5px;"></div>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Unknown</b> <b>Unknown</b>
	Date or dates debt was incurred  	Basis for the claim: <b>Unpaid wages and/or vacation time which may be asserted</b>	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.21	Priority creditor's name and mailing address <b>Peter Laws II</b> <div style="background-color: black; width: 100px; height: 20px; margin-top: 5px;"></div>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Unknown</b> <b>Unknown</b>
	Date or dates debt was incurred  	Basis for the claim: <b>Unpaid wages and/or vacation time which may be asserted</b>	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.22	Priority creditor's name and mailing address <b>Ryan Biggs</b> <div style="background-color: black; width: 100px; height: 20px; margin-top: 5px;"></div>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Unknown</b> <b>Unknown</b>
	Date or dates debt was incurred  	Basis for the claim: <b>Unpaid wages and/or vacation time which may be asserted</b>	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	Name	Case number (if known)	21-32351
2.23	Priority creditor's name and mailing address <b>Ryan Pederson</b> <div style="background-color: black; width: 150px; height: 30px; margin-top: 5px;"></div>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Unknown</b> <b>Unknown</b>
	Date or dates debt was incurred  	Basis for the claim: <b>Unpaid wages and/or vacation time which may be asserted</b>	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.24	Priority creditor's name and mailing address <b>Scott McHugh</b> <div style="background-color: black; width: 150px; height: 30px; margin-top: 5px;"></div>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Unknown</b> <b>Unknown</b>
	Date or dates debt was incurred  	Basis for the claim: <b>Unpaid wages and/or vacation time which may be asserted</b>	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.25	Priority creditor's name and mailing address <b>Shoheb Merchant</b> <div style="background-color: black; width: 150px; height: 30px; margin-top: 5px;"></div>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Unknown</b> <b>Unknown</b>
	Date or dates debt was incurred  	Basis for the claim: <b>Unpaid wages and/or vacation time which may be asserted</b>	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.26	Priority creditor's name and mailing address <b>Stephan Tompsett</b> <div style="background-color: black; width: 150px; height: 30px; margin-top: 5px;"></div>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Unknown</b> <b>Unknown</b>
	Date or dates debt was incurred  	Basis for the claim: <b>Unpaid wages and/or vacation time which may be asserted</b>	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	



Debtor **Limetree Bay Services, LLC**  
Name

Case number (if known)

**21-32351**

2.27 Priority creditor's name and mailing address

**Wesley Mairura**

As of the petition filing date, the claim is:

*Check all that apply.*☐ Contingent☒ Unliquidated☐ Disputed**Unknown****Unknown**

Date or dates debt was incurred

Basis for the claim:

**Unpaid wages and/or vacation time which may be asserted**

Last 4 digits of account number

Is the claim subject to offset?

Specify Code subsection of PRIORITY  
unsecured claim: 11 U.S.C. § 507(a) (4)☒ No☐ Yes**Part 2: List All Creditors with NONPRIORITY Unsecured Claims****3. List in alphabetical order all of the creditors with nonpriority unsecured claims.** If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.**Amount of claim**

3.1 Nonpriority creditor's name and mailing address

**Limetree Bay Energy, LLC  
842 West Sam Houston Parkway N  
Suite 400  
Houston, TX 77024**

Date(s) debt was incurred \_

Last 4 digits of account number \_

As of the petition filing date, the claim is: *Check all that apply.*☐ Contingent☐ Unliquidated☐ DisputedBasis for the claim: intercompany debtIs the claim subject to offset? ☐ No ☒ Yes**\$137,378.47**

3.2 Nonpriority creditor's name and mailing address

**Limetree Bay Refining Operating, LLC  
#1 Estate Hope  
Christiansted, VI 00820**

Date(s) debt was incurred \_

Last 4 digits of account number \_

As of the petition filing date, the claim is: *Check all that apply.*☐ Contingent☐ Unliquidated☐ DisputedBasis for the claim: intercompany debtIs the claim subject to offset? ☐ No ☒ Yes**\$454,995.57**

3.3 Nonpriority creditor's name and mailing address

**Limetree Bay Refining, LLC  
1 Estate Hope  
Christiansted, VI 00820**

Date(s) debt was incurred \_

Last 4 digits of account number \_

As of the petition filing date, the claim is: *Check all that apply.*☐ Contingent☐ Unliquidated☐ DisputedBasis for the claim: intercompany debtIs the claim subject to offset? ☐ No ☒ Yes**\$5,273,781.85**

3.4 Nonpriority creditor's name and mailing address

**Limetree Bay Terminals, LLC  
#1 Estate Hope  
Christiansted, VI 00820-5652**

Date(s) debt was incurred \_

Last 4 digits of account number \_

As of the petition filing date, the claim is: *Check all that apply.*☐ Contingent☐ Unliquidated☒ DisputedBasis for the claim: intercompany debtIs the claim subject to offset? ☐ No ☒ Yes**\$68,709.14**

3.5 Nonpriority creditor's name and mailing address

**MetLife - Group Benefits  
PO Box 804466  
Kansas City, MO 64180-4466**Date(s) debt was incurred Various

Last 4 digits of account number \_

As of the petition filing date, the claim is: *Check all that apply.*☐ Contingent☐ Unliquidated☐ DisputedBasis for the claim: Group InsuranceIs the claim subject to offset? ☒ No ☐ Yes**\$4,147.78****Part 3: List Others to Be Notified About Unsecured Claims**

Debtor **Limetree Bay Services, LLC**  
NameCase number (if known) **21-32351**

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address

On which line in Part 1 or Part 2 is the related creditor (if any) listed?

Last 4 digits of account number, if any

**Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims**

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

Total of claim amounts	
5a.	\$ 0.00

5b. Total claims from Part 2

5b.	+	\$ 5,939,012.81
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5c. Total of Parts 1 and 2

Lines 5a + 5b = 5c.

5c.	\$ 5,939,012.81
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**Fill in this information to identify the case:**Debtor name **Limetree Bay Services, LLC**United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF TEXAS**Case number (if known) **21-32351**☐ Check if this is an amended filing**Official Form 206G****Schedule G: Executory Contracts and Unexpired Leases****12/15****Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.****1. Does the debtor have any executory contracts or unexpired leases?**☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* (Official Form 206A/B).*Property***2. List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**2.1. State what the contract or lease is for and the nature of the debtor's interest **Excess Liability Insurance Policy No. NAMBM2100005**State the term remaining **expires 6/1/22**

List the contract number of any government contract \_\_\_\_\_

**Arcadia/Ark/Helix  
Lockton Companies, LLC - Houston  
3657 Briarpark Drive  
Suite 700  
Houston, TX 77042**2.2. State what the contract or lease is for and the nature of the debtor's interest **Policy # B0713ENCAS2000011**

State the term remaining \_\_\_\_\_

List the contract number of any government contract \_\_\_\_\_

**Chaucer/Apollo  
Lockton Companies, LLC - Houston  
3657 Briarpark Drive  
Suite 700  
Houston, TX 77042**2.3. State what the contract or lease is for and the nature of the debtor's interest **Workers Compensation Insurance Policy**State the term remaining **expires 12/1/2021**

List the contract number of any government contract \_\_\_\_\_

**Employers Insurance of Wausau  
Lockton Companies, LLC  
3657 Briarpark Drive  
Suite 700  
Houston, TX 77042**2.4. State what the contract or lease is for and the nature of the debtor's interest **Sublease of Houston Office Space**

State the term remaining \_\_\_\_\_

List the contract number of any government contract \_\_\_\_\_

**Gulfmark Offshore, Inc  
Attn: Matthew Mancheski  
6002 Rogerdale Road  
Suite 600  
Houston, TX 77072-1655**

**Fill in this information to identify the case:**Debtor name Limetree Bay Services, LLCUnited States Bankruptcy Court for the: SOUTHERN DISTRICT OF TEXASCase number (if known) 21-32351☐ Check if this is an amended filing**Official Form 206H  
Schedule H: Your Codebtors**

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

**1. Do you have any codebtors?**☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.☒ Yes

**2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.**

*Column 1: Codebtor**Column 2: Creditor***Name****Mailing Address****Name***Check all schedules that apply:*2.1 **Limetree Bay  
Cayman II, LLC****Arcadia/Ark/Helix**☐ D \_\_\_\_\_  
☐ E/F \_\_\_\_\_  
☒ G 2.12.2 **Limetree Bay  
Cayman II, LLC****Chaucer/Apollo**☐ D \_\_\_\_\_  
☐ E/F \_\_\_\_\_  
☒ G 2.22.3 **Limetree Bay  
Cayman, LLC****Arcadia/Ark/Helix**☐ D \_\_\_\_\_  
☐ E/F \_\_\_\_\_  
☒ G 2.12.4 **Limetree Bay  
Cayman, LLC****Chaucer/Apollo**☐ D \_\_\_\_\_  
☐ E/F \_\_\_\_\_  
☒ G 2.22.5 **Limetree Bay  
Financing, LLC****Arcadia/Ark/Helix**☐ D \_\_\_\_\_  
☐ E/F \_\_\_\_\_  
☒ G 2.1

Debtor Limetree Bay Services, LLCCase number (if known) 21-32351**Additional Page to List More Codebtors**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

2.6	Limetree Bay Financing, LLC	Chaucer/Apollo	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input checked="" type="checkbox"/> G <u>2.2</u>
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2.7	Limetree Bay Refining Holdings II, LLC	#1 Estate Hope Christiansted, VI 00820	Arcadia/Ark/Helix	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input checked="" type="checkbox"/> G <u>2.1</u>
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2.8	Limetree Bay Refining Holdings II, LLC	#1 Estate Hope Christiansted, VI 00820	Chaucer/Apollo	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input checked="" type="checkbox"/> G <u>2.2</u>
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2.9	Limetree Bay Refining Holdings, LLC	#1 Estate Hope Christiansted, VI 00820	Arcadia/Ark/Helix	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input checked="" type="checkbox"/> G <u>2.1</u>
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2.10	Limetree Bay Refining Holdings, LLC		Chaucer/Apollo	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input checked="" type="checkbox"/> G <u>2.2</u>
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2.11	Limetree Bay Refining Marketing, LLC	#1 Estate Hope Christiansted, VI 00820	Arcadia/Ark/Helix	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input checked="" type="checkbox"/> G <u>2.1</u>
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2.12	Limetree Bay Refining Marketing, LLC	#1 Estate Hope Christiansted, VI 00820	Chaucer/Apollo	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input checked="" type="checkbox"/> G <u>2.2</u>
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2.13	Limetree Bay Refining Operating, LLC	#1 Estate Hope Christiansted, VI 00820	Arcadia/Ark/Helix	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input checked="" type="checkbox"/> G <u>2.1</u>
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Debtor Limetree Bay Services, LLCCase number (if known) 21-32351**Additional Page to List More Codebtors**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

2.14	Limetree Bay Refining Operating, LLC	#1 Estate Hope Christiansted, VI 00820	Chaucer/Apollo	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input checked="" type="checkbox"/> G <u>2.2</u>
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2.15	Limetree Bay Refining, LLC	1 Estate Hope Christiansted, VI 00820	Arcadia/Ark/Helix	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input checked="" type="checkbox"/> G <u>2.1</u>
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2.16	Limetree Bay Refining, LLC	1 Estate Hope Christiansted, VI 00820	Chaucer/Apollo	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input checked="" type="checkbox"/> G <u>2.2</u>
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2.17	Limetree Bay Terminals, LLC	#1 Estate Hope Christiansted, VI 00820-5652	Arcadia/Ark/Helix	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input checked="" type="checkbox"/> G <u>2.1</u>
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2.18	Limetree Bay Terminals, LLC	#1 Estate Hope Christiansted, VI 00820-5652	Chaucer/Apollo	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input checked="" type="checkbox"/> G <u>2.2</u>
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2.19	Limetree Bay Ventures, LLC		Arcadia/Ark/Helix	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input checked="" type="checkbox"/> G <u>2.1</u>
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2.20	Limetree Bay Ventures, LLC		Chaucer/Apollo	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input checked="" type="checkbox"/> G <u>2.2</u>
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**Fill in this information to identify the case:**Debtor name Limetree Bay Services, LLCUnited States Bankruptcy Court for the: SOUTHERN DISTRICT OF TEXASCase number (if known) 21-32351☐ Check if this is an amended filing

## Official Form 202

**Declaration Under Penalty of Perjury for Non-Individual Debtors**

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

**WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**

**Declaration and signature**

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ Amended Schedule \_\_\_\_\_
- ☐ Chapter 11 or Chapter 9 Cases: Consolidated List of Creditors Who Have the 30 Largest Unsecured Claims and Are Not Insiders (Official Form 204)
- ☐ Other document that requires a declaration \_\_\_\_\_

I declare under penalty of perjury that the foregoing is true and correct to the best of my knowledge based upon the information available to me at this time.

Executed on September 7, 2021X /s/ Mark Shapiro

Signature of individual signing on behalf of debtor

Mark Shapiro

Printed name

Chief Restructuring Officer

Position or relationship to debtor